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| Fill in this information to identify your case: | | | |
|---|-------------------------------|--|------------------|
| United States Bankruptcy Court for the: | | | |
| | | | |
| Northern District of: Illinois (State) | | | |
| Case number (if known) | Chapter you are filing under: | | |
| | Chapter 7 | | |
| | Chapter 11 | | |
| | Chapter 12 | | Check if this is |
| | Chapter 13 | | amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Clarene | |
| Write the name that is on | First name | First name |
| your government-issued picture identification (for example, your driver's | Middle name Johnson | Middle name |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last 8 years | First name | First name |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX1509 | xxx - xx- |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| Debtor 1 Clarene | Johnson | Case number (if known) |
|--|---|--|
| First Name | Middle Name Last Name | |
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Any business names and Employer Identification | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years Include trade names and | Business name | Business name |
| doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | 1440 Jackson | If Debtor 2 lives at a different address: |
| | 1440 Jackson Number Street Apt. 3G | Number Street |
| | North Chicago Illinois 60064 City State Zip Code | City State Zip Code |
| | Lake County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district | Check one: | Check one: |
| to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name Part 2: **Tell the Court About Your Bankruptcy Case** 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Code you Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. are choosing to file Chapter 7 under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for fee more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for ✓ No. bankruptcy within the last 8 years? Yes. District MM / DD / YYYY When District Case number District Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Relationship to you Yes. Debtor spouse who is not When District Case number, if known filing this case with you, or by a business Relationship to you Debtor partner, or by an District Case number, if known affiliate? MM / DD / YYYY 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you? ✓ No. Go to line 12. Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? Ⅵ I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Clarene Johnson Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded ✓ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$10,000,000,001-\$50 billion to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Clarene Johnson Signature of Debtor 1 Signature of Debtor 2 Executed on __5/10/2018 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Clarene | | Johnson | Case number (if I | known) | | | |
|--|--|----------------------|------------------------------|---|--|--|--|
| First Name | Middle Name | Last Name | | | | | |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 1 | 2, or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the Iso certify that I have delivered to the | | | |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § | 342(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I | | | |
| represented by an | have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | | | | |
| attorney, you do not | · · | , , | | • | | | |
| need to file this page. | /s/ Nathan Delman | | Date | 5/10/2018 | | | |
| | Signature of Attorney f | or Debtor | M | M / DD / YYYY | | | |
| | | | | | | | |
| | | | | | | | |
| | Nathan Delman | | | | | | |
| | Printed name | | | | | | |
| | 0 11 5 | | | | | | |
| | Semrad Law Firm | | | | | | |
| | Firm name | | | | | | |
| | 5101 Washington Stre | eet | | | | | |
| | Street | | | | | | |
| | Unit 29 | | | | | | |
| | | | | | | | |
| | Gurnee | | Illinois | 60031 | | | |
| | City | | State | Zip Code | | | |
| | Contact phone | 3124473700 | Email address | ndelman@semradlaw.com | | | |
| | 6296205 | | Illinois | | | | |
| | Bar number | | State | | | | |

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| Fill in this infor | mation to identify your c | ase: | |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Clarene | | Johnson |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | Ψ0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$3,750.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$3,750.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | Φ0.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | - |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$4,861.00 |
| Your total liabilities | \$4,861.00 |
| art 3: Summarize Your Income and Expenses | |
| . Schedule I: Your Income (Official Form 106I) | |
| Copy your combined monthly income from line 12 of Schedule I | \$1,375.00 |
| , | |
| . Schedule J: Your Expenses (Official Form 106J) | \$1,367.00 |

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| Deb | tor 1 Clarene First Name | Middle Name | Johnson Last Name | Case number (if known) | | | | | | |
|---|---|---|--------------------------------|--|------|--|--|--|--|--|
| Part · | | uestions for Administrat | | ords | | | | | | |
| 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. | | | | | | | | | |
| 7. W | /hat kind of debt do you | have? | | | | | | | | |
| Ŀ | | rily consumer debts. Consu urpose. 11 U.S.C. § 101(8). F | | by an individual primarily for a personal, I purposes. 28 U.S.C. § 159. | | | | | | |
| | | rimarily consumer debts. You with your other schedules. | ou have nothing to report on | this part of the form. Check this box and sul | bmit | | | | | |
| | 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | | | | | | | | | |
| 9. | Copy the following spec | cial categories of claims fro | m Part 4, line 6 of Schedul | e E/F: | | | | | | |
| | From Part 4 on Schedu | le E/F, copy the following: | | Total claim | | | | | | |
| | 9a. Domestic support ob | ligations (Copy line 6a.) | | \$0.00 | | | | | | |
| | 9b. Taxes and certain oth | er debts you owe the governr | ment. (Copy line 6b.) | \$0.00 | | | | | | |
| | | | | | | | | | | |
| | 9d. Student loans. (Copy | at loans. (Copy line 6f.) | | \$0.00 | | | | | | |
| | 9e. Obligations arising ou priority claims. (Copy line | It of a separation agreement o | r divorce that you did not rep | ort as \$0.00 | | | | | | |
| | 9f. Debts to pension or p | rofit-sharing plans, and other | similar debts. (Copy line 6h.) | \$0.00 | | | | | | |

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this i | information to identify your case: | : | | | |
|---|---|---|--|--|--|
| Debtor 1 | Clarene | | Johnson | | |
| Deptor I | First Name | Middle Nam | | | |
| Debtor 2 | | | | | |
| (Spouse, if fili | First Name | Middle Nam | e Last Name | | |
| United Sta | tes Bankruptcy Court for the: No | orthern | District of Illinois (State) | | |
| Case num (If known) | ber | | | | |
| Officia | I Form 106A/B | | | | Check if this is an amended filing |
| | dule A/B: Property | V | | | 12/ ⁻ |
| category w responsible write your | where you think it fits best. Be a e for supplying correct informat name and case number (if know | s complete and ion. If more spac vn). Answer ever | an asset only once. If an asset fits in more accurate as possible. If two married people is needed, attach a separate sheet to the y question. or Other Real Estate You Own or Ha | e are filing together, both a nis form. On the top of any | are equally |
| 1. Do you | own or have any legal or equita | able interest in a | ny residence, building, land, or similar pro | perty? | |
| ✓ | No. Go to Part 2 | | | | |
| | Yes. Where is the property? | | | | |
| 1.1 | Street address, if available, or other | | hat is the property? Check all that apply. Single-family home | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | | | Duplex or multi-unit building | Current value of the | Current value of the |
| | | <u> </u> | Condominium or cooperative | entire property? | portion you own? |
| | | Ļ | Manufactured or mobile home Land | | |
| | Number Street | <u> </u> | Investment property | Describe the nature of | f your ownership |
| | | F | Timeshare | interest (such as fee s the entireties, or a life | |
| | City State 2 | Zip Code | Other | | ——— |
| | | | াho has an interest in the property? Check ne. | Check if this is co (see instructions) | ommunity property |
| | | Ē | Debtor 1 only | Ц | |
| | | Ē | Debtor 2 only | | |
| | | <u> </u> | Debtor 1 and Debtor 2 only | | |
| | | ř | At least one of the debtors and another | | |
| | | 0 | ┛ ther information you wish to add about thi | s item, such as local | |
| | | | roperty identification number: | | |
| If you | own or have more than one, list he | | | | |
| | | w | /hat is the property? Check all that apply. | | claims or exemptions. Put ared claims on Schedule D: |
| 1.2 | Street address, if available, or other | er description | Single-family home | | aims Secured by Property. |
| | | Ļ | Duplex or multi-unit building | Current value of the | Current value of the |
| | | | Condominium or cooperative Manufactured or mobile home | entire property? | portion you own? |
| | | Ļ | Land | | |
| | Number Street | <u> </u> | Investment property | Describe the nature of | f your ownership |
| | | - | Timeshare | interest (such as fee s the entireties, or a life | |
| | City State 2 | Zip Code | Other | | e estatej, ii kilowii. |
| | | | I'ho has an interest in the property? Check ne. | Check if this is co (see instructions) | ommunity property |
| | | | Debtor 1 only | ш | |
| | | Ē | Debtor 2 only | | |
| | | F | Debtor 1 and Debtor 2 only | | |
| | | F | At least one of the debtors and another | | |
| | | L 0 | ⊒ ther information you wish to add about thi | s item, such as local | |
| | | | operty identification number: | | |

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| Debtor 1 | Clarene | Johnson Case | e number (if known) |
|---------------------------------------|---|--|--|
| | First Name Mid | dle Name Last Name | |
| | et address, if available, or other descr nber Street | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Check if this is community property (see instructions) |
| | the dollar value of the portion you ve attached for Part 1. Write that | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about th property identification number: Jown for all of your entries from Part 1, including an number here. | <u></u> |
| you nu | ve attached for 1 art 1. write that | hamber nere: | |
| Do you ow you own t 3. Cars, va | hat someone else drives. If you lease ins, trucks, tractors, sport utility vehic | le interest in any vehicles, whether they are register a vehicle, also report it on Schedule G: Executory Contra cles, motorcycles | • |
| 3.1 | Make Model: Year: | Who has an interest in the property? Cone. | Check Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D:</i> Creditors Who Have Claims Secured by Property. |
| | Approximate mileage: Other information: | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community propert instructions) | |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | Who has an interest in the property? Cone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community propert | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? |
| | | instructions) | • |

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| ebtor 1 | Clarene First Name | Middle Name | Johnson Last Name | Case numb | er (if known) | |
|---------|--|-------------|--|---|--|--|
| 0.0 | | Middle Name | | | D | -1-' D |
| 3.3 | Make Model: | | Who has an interest in the one. | property? Check | | claims or exemptions. Pured claims on <i>Schedule</i> |
| | Year: | | Debtor 1 only | | - | aims Secured by Property |
| | Approximate mileage: | | | | | |
| | . +1 | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 of | only | entire property? | portion you own? |
| | | | At least one of the debto | ors and another | | |
| | | | Check if this is commu | unity property (see | | |
| | | | instructions) | | | |
| 3.4 | Make | | Who has an interest in the | property? Check | | claims or exemptions. P |
| | Model: | | one. | | | red claims on Schedule |
| | Year: | | Debtor 1 only | | Creditors Who Have Cla | aims Secured by Property |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 of | only | entire property? | portion you own? |
| | | | At least one of the debto | ors and another | | |
| | | | Check if this is commu | unity property (see | | |
| | | | instructions) | | | |
| | | • | instructions) ner recreational vehicles, other ft, fishing vessels, snowmobiles, | · | | |
| | | • | ner recreational vehicles, othe | · | | |
| Exa | mples: Boats, trailers, motors No Yes | • | ner recreational vehicles, othe | motorcycle accessor | ries Do not deduct secured | claims or exemptions. P |
| Exa | mples: Boats, trailers, motors No Yes Make Model: | • | ner recreational vehicles, other ft, fishing vessels, snowmobiles, | motorcycle accessor | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Exa | mples: Boats, trailers, motors No Yes Make Model: Year: | • | ner recreational vehicles, other fighting vessels, snowmobiles, which was an interest in the | motorcycle accessor | Do not deduct secured the amount of any secu | • |
| Exa | mples: Boats, trailers, motors No Yes Make Model: | • | mer recreational vehicles, other fit, fishing vessels, snowmobiles, Who has an interest in the one. | motorcycle accessor | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Exa | mples: Boats, trailers, motors No Yes Make Model: Year: | • | who has an interest in the one. Debtor 1 only | motorcycle accessor property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule aims Secured by Property |
| Exa | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only | motorcycle accessor e property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | rred claims on Schedule nims Secured by Property Current value of the |
| Exa | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or | motorcycle accessor property? Check only ors and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | rred claims on Schedule nims Secured by Property Current value of the |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of At least one of the debtor Check if this is communication. | e property? Check only ors and another unity property (see | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? | rred claims on Schedule nims Secured by Property Current value of the |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of At least one of the debtor instructions) | e property? Check only ors and another unity property (see | Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property? Do not deduct secured the amount of any secured. | claims or Schedule control of the portion you own? claims or exemptions. Pured claims on Schedule |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of the debtor 1 only the one of the debtor 1 only the one of the debtor 1 only the one of the debtor 2 of the debtor 2 of the one of the debtor 2 of the one of the debtor of the one of the debtor of the one of the | e property? Check only ors and another unity property (see | Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property? Do not deduct secured the amount of any secured. | red claims on Schedule ims Secured by Property Current value of the portion you own? |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtor instructions) Who has an interest in the one. | e property? Check only ors and another unity property (see | Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property? Do not deduct secured the amount of any secured. | claims or Schedule control of the portion you own? claims or exemptions. Pured claims on Schedule |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on the debtor th | e property? Check only ors and another unity property (see | Do not deduct secured the amount of any secucreditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secucreditors Who Have Classifications Classification Class | red claims on Schedule aims Secured by Property Current value of the portion you own? claims or exemptions. P ured claims on Schedule aims Secured by Property |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of At least one of the debtor instructions) Who has an interest in the one. Debtor 1 and Debtor 2 of Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only | e property? Check only ors and another unity property (see e property? Check | Do not deduct secured the amount of any secucreditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secucreditors Who Have Classification Current value of the | red claims on Schedule aims Secured by Property Current value of the portion you own? claims or exemptions. P ured claims on Schedule aims Secured by Property Current value of the |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of the debtor one. Check if this is communinstructions) Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | e property? Check only ors and another unity property (see e property? Check | Do not deduct secured the amount of any secucreditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secucreditors Who Have Classification Current value of the | red claims on Schedule aims Secured by Property Current value of the portion you own? claims or exemptions. P ured claims on Schedule aims Secured by Property Current value of the |

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$250.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, aold, silver No Yes. Describe... Ring, Bracelet \$3000.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3650.00 for Part 3. Write that number here

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Prepaid Debit Card \$100.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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| Dep | first Name | Middle Name | Johnson Last Name | Case number (if known) | |
|-----|--|---|---|---|---|
| 20. | Government and corp Negotiable instruments | orate bonds and other negotiab | le and non-negotiable i checks, promissory notes | s, and money orders. | |
| | Non-negotiable instrum | ents are those you cannot transfer | to someone by signing o | or delivering them. | |
| | Yes. Give specific information about them | Issuer name: | | | |
| | | | | | |
| | | | | | |
| | | - | | | |
| 21. | Retirement or pension Examples: Interests in II | | . thrift savings accounts. | or other pension or profit-sharing plans | |
| | ✓ No | # 4 = 11.00 4 11.00 g, 10 1 (1.9), 10 0 (0.9) | , ammi darinigo addeante, t | or early periodical or promit channel plant | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | - | | |
| | | IRA: | | | |
| | | | - | | - |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | • |
| | | Prepaid rent: | - | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23 | Annuities (A contract for | or a periodic payment of money to | vou either for life or for a | number of years) | |
| | ✓ No | or a policale payment or money to | , , , , , , , , , , , , , , , , , , , | | |
| | Yes | Issuer name and description: | | | |
| | _ | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debt | or 1 Clarene | Johnson | Case number (if known) | |
|------|--|--|---|---|
| 24. | First Name | Middle Name Last Name | m or under a qualified state tuition program | |
| 24. | 26 U.S.C. §§ 530(b)(1), 52 | n IRA, in an account in a qualified ABLE progra 29A(b), and 529(b)(1). | ini, or uniter a quanneti state tuttion program. | |
| | ✓ No | | | |
| | Institution n | ame and description. Separately file the records of | any interests.11 U.S.C. § 521(c): | |
| | | | | |
| | | | | |
| | | | | |
| 25. | Trusts, equitable or futur exercisable for your bene | re interests in property (other than anything lis efit | sted in line 1), and rights or powers | |
| | √ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 26. | Patents, copyrights, trad | lemarks, trade secrets, and other intellectual | property | |
| | Examples: Internet domain | names, websites, proceeds from royalties and lice | ensing agreements | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 27. | | d other general intangibles s, exclusive licenses, cooperative association holdir | ngs, liquor licenses, professional licenses | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |
| Mon | ney or property owed to | you? | | Current value of the |
| Mon | ney or property owed to | you? | | Current value of the portion you own? |
| Mon | ney or property owed to | you? | | |
| | ney or property owed to | o you? | | portion you own? Do not deduct secured |
| | | o you? | | portion you own? Do not deduct secured |
| | Tax refunds owed to you No Yes. Give specific inform | nation | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed to you No Yes. Give specific informabout them, incluyou already filed the | mation ding whether he returns | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you No Yes. Give specific informabout them, inclu | mation ding whether he returns | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you No Yes. Give specific inform about them, incluyou already filed the and the tax years. Family support | mation ding whether he returns | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific inform about them, incluyou already filed thand the tax years. Family support Examples: Past due or lump | mation ding whether he returns | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific inform about them, incluyou already filed the and the tax years. Family support Examples: Past due or lump No | mation ding whether he returns | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific inform about them, incluyou already filed thand the tax years. Family support Examples: Past due or lump | mation ding whether he returns | State: Local: aintenance, divorce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific inform about them, incluyou already filed the and the tax years. Family support Examples: Past due or lump No | mation ding whether he returns | State: Local: aintenance, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific inform about them, incluyou already filed the and the tax years. Family support Examples: Past due or lump No | mation ding whether he returns | State: Local: aintenance, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific inform about them, incluyou already filed the and the tax years. Family support Examples: Past due or lump No | mation ding whether he returns | State: Local: Alimony: Maintenance: Support: Divorce settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump No Yes. Give specific inform | mation ding whether he returns | State: Local: aintenance, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump No Yes. Give specific inform Other amounts someone Examples: Unpaid wages, d | mation ding whether he returns o sum alimony, spousal support, child support, ma mation owes you lisability insurance payments, disability benefits, sic | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump No Yes. Give specific inform Other amounts someone of Examples: Unpaid wages, do Social Security be | mation ding whether he returns so sum alimony, spousal support, child support, ma mation | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump ✓ No Yes. Give specific inform Other amounts someone of Examples: Unpaid wages, do Social Security be | mation ding whether he returns o sum alimony, spousal support, child support, ma mation owes you lisability insurance payments, disability benefits, sic | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you No Yes. Give specific informabout them, incluyou already filed thand the tax years. Family support Examples: Past due or lump No Yes. Give specific inform Other amounts someone of Examples: Unpaid wages, do Social Security be | mation ding whether he returns o sum alimony, spousal support, child support, ma mation owes you lisability insurance payments, disability benefits, sic | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Clarene | | Johnson | Case number (if known) | |
|------|--|----------------------------|---|---|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance po Examples: Health, disability | | alth savings account (HSA); credit, he | omeowner's, or renter's insurance | |
| | No Yes. Name the insurar of each policy and list | | Company name: | Beneficiary: | Surrender or refund value: |
| | | | | | |
| 32. | Any interest in property of If you are the beneficiary of property because someone | f a living trust, expect p | someone who has died proceeds from a life insurance policy | , or are currently entitled to receive | |
| | ✓ No Yes. Describe | | | | |
| 33. | | | you have filed a lawsuit or made a urance claims, or rights to sue | a demand for payment | |
| | No Yes. Describe | | | | |
| 34. | Other contingent and un to set off claims | liquidated claims of | every nature, including counterc | laims of the debtor and rights | |
| | No Yes. Describe | | | | |
| | | | | | |
| 35. | Any financial assets you | did not already list | | | |
| | ✓ No Yes. Describe | | | | |
| | | | | | |
| 36. | | • | n Part 4, including any entries fo | | \$100.00 |
| | | | | | |
| Part | 5: Describe Any Busi | iness-Related Pro | perty You Own or Have an In | terest In. List any real estate in Part | 1. |
| 37. | Do you own or have any | legal or equitable in | terest in any business-related pro | pperty? | |
| | No. Go to Part 6. | | | С | urrent value of the |
| | Yes. Go to line 38. | | | D | ortion you own? o not deduct secured claims r exemptions |
| 38. | Accounts receivable or o | commissions you alre | eady earned | J. | , |
| | ✓ No Yes. Describe | | | | |
| 39. | Office equipment, furnish Examples: Business-related | | , modems, printers, copiers, fax ma | chines, rugs, telephones, desks, chairs, electr | onic devices |
| | No Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Clarene | Johnson Case number (if known) | |
|--------|--------------------------------|---|------------------------------|
| ı | First Name | Middle Name Last Name | |
| 40. | Machinery, fixtures, e | equipment, supplies you use in business, and tools of your trade | |
| | ✓ No | | |
| | Yes. Describe | | |
| | _ | | |
| | | | |
| 41. | Inventory | | |
| | ✓ No | | |
| | Yes. Describe | | |
| | Ш | | |
| | | | |
| 42. | Interests in partnersh | nips or joint ventures | |
| | ✓ No | | |
| | Yes. Give specific | Name of entity: % of ownership: | |
| | information about | | |
| | them | | |
| | | | <u> </u> |
| | | | |
| 43. | Customer lists, mailing | lists, or other compilations | |
| | — | | |
| | ✓ No | W. C. W. C. W. C. W. C. W. A. H. C. W. A. | |
| | Yes. Do your lists if | nclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | ☐ No | | |
| | Yes. Desc | ribe | |
| | | | |
| 44. | Any business-related | property you did not already list | |
| | ✓ No | | |
| | ightharpoonup | | |
| | Yes. Give specific information | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | all of your entries from Part 5, including any entries for pages you have attached | |
| for Pa | art 5. Write that number | er here | |
| | Describe Any Fa | arm- and Commercial Fishing-Related Property You Own or Have an Interest | In |
| Part | If you own or have an | n interest in farmland, list it in Part 1. | ••• |
| 46 | | | |
| 46. | שט you own or nave a | ny legal or equitable interest in any farm- or commercial fishing-related property? | Current value of the |
| | No. Go to Part 7. | | portion you own? |
| | Yes. Go to line 47. | | Do not deduct secured claims |
| | | | or exemptions |
| 47. | Farm animals | author forms releast field | |
| | Examples: Livestock, p | outiry, tarm-raised tish | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| | | | |

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| Debt | or 1 Clarene | Middle Name | Johnson | Case number (if known) | |
|--------------|----------------------------|--|-------------------------|---------------------------------|-------------|
| | First Name | Middle Name | Last Name | | |
| 48. | Crops-either growing of | r harvested | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 49. | Farm and fishing equip | ment, implements, machinery, fixtu | res, and tools of trade | | |
| | ✓ No | | | | |
| | <u></u> | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 50. | Farm and fishing suppl | ies, chemicals, and feed | | | |
| | | , | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 51 | Any farm- and commer | cial fishing-related property you did | I not already list | | |
| • | | oral morning rotation property you are | un ouu, | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | Г | |
| | | of your entries from Part 6, includi | | | |
| for Pa ▶ | rt 6. Write that number | here | | | |
| | | | | _ | |
| | | | | | |
| | | | | | |
| Part 7 | Describe All Prop | oerty You Own or Have an Inter | est in That You Did N | Not List Above | |
| 53. | | erty of any kind you did not already | list? | | |
| | Examples: Season tickets | , country club membership | | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| 54 Ac | d the dollar value of all | of your entries from Part 7. Write the | hat number here | | • |
| | | , | | | |
| | | | | | - |
| | | | | | |
| | | | | | |
| | | | | | |
| Part 8 | List the Totals of | Each Part of this Form | | | |
| | | | | | |
| 55. F | art 1: Total real estate, | line 2 | | > | |
| | | | | | |
| 56. p | art 2 total vehicles, line | 5 | | _ | |
| 57. P | art 3: Total personal an | d household items, line 15 | \$3650.00 | | |
| 58. P | art 4: Total financial as | sets. line 36 | | - | |
| | | | \$100.00 | - | |
| 59. F | Part 5: Total business-re | lated property, line 45 | | _ | |
| 60. F | art 6: Total farm- and fi | shing-related property, line 52 | | | |
| 61. F | Part 7: Total other prope | erty not listed, line 54 | _ | - | |
| 62 T | otal personal property | Add lines 56 through 61 | | | |
| J I | a. po. sona. proporty. | | \$3750.00 | Copy personal property total ► | + \$3750.00 |
| | | | | copy polotical property total P | |
| | | | | | \$3750.00 |
| 63. T | otal of all property on S | chedule A/B. Add line 55 + line 62 | | | |

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| Fill | in this infori | nation to identify your ca | ase: | | | |
|--|--|--|--|--|---|--|
| Deb | otor 1 | Clarene | | Johnson | | |
| Dok | 7.01 | First Name | Middle Name | Last Name | | |
| | otor 2 ouse, if filing) | First Name | Middle Name | Last Name | | |
| | | | | | | |
| Uni | ted States B | ankruptcy Court for the: | Northern D | vistrict of Illinois (State) | | |
| | se number lown) | | | | | |
| | - | | | | | Check if this is an |
| Ot | ficial | Form 106C | | | | amended filing |
| Sc | hedul | C: The Prop | erty You Claim a | s Exempt | | 04/16 |
| Be a info as e add For stat the tax-und you Par | eas completermation. Use exempt. If ritional page each iten are a specific amount of exempt relevant to exempt. Iden **The image of the image of th | le and accurate as possible and accurate as possible property you nore space is needed, ges, write your name an of property you classic dollar amount as of any applicable state tirement funds—mathat limits the exempton would be limited to tify the Property You of exemptions are you are claiming state and feare claiming federal exemptions. | ssible. If two married peop a listed on <i>Schedule A/B</i> : a fill out and attach to this and case number (if known im as exempt, you must sexempt. Alternatively, you utory limit. Some exempt ay be unlimited in dollar attion to a particular dollar to the applicable statutor | le are filing together, both Property (Official Form 106 page as many copies of Pa). specify the amount of the u may claim the full fair nations—such as those for lamount. However, if you camount and the value of y amount. The if your spouse is filing with pations. 11 U.S.C. § 522(b)(3) 22 | 6A/B) as your sour art 2: Additional Part 2: Addition you conarket value of the ealth aids, rights claim an exemption the property is designed. | nsible for supplying correct ree, list the property that you claim age as necessary. On the top of any claim. One way of doing so is to be property being exempted up to a to receive certain benefits, and on of 100% of fair market value etermined to exceed that amount, |
| | | ription of the property hedule A/B that lists th | | Amount of the exemption y Check only one box for each | | Specific laws that allow exemption |
| | Brief | | | | | 735 ILCS 5/12-1001(b) |
| | description | | \$100.00 | \$100.0 | 00 | |
| | | king account, iid Debit Card | | 100% of fair market va | | |
| | Line from | <i>√B:</i> 17 | | applicable statutory lim | nit | |
| | Brief | <u> </u> | | | | 735 ILCS 5/12-1001(b) |
| | description | | \$400.00 | \$400.0 | 00 | |
| | Line from | Furniture | | 100% of fair market va | | |
| | Schedule / | 4∕B: <u>06</u> | | applicable statutory lim | nit | |
| 3. | • | • | kemption of more than \$160, and every 3 years after that for | | of adjustment.) | |

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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| Deb | otor 1 Clarene First Name Midd | lle Name | Johnson Case number <i>(if kn</i> Last Name | own) |
|-----|---|---|---|------------------------------------|
| Par | t 2: Additional Page | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| | Brief description: Ring, Bracelet Line from Schedule A/B: 12 | \$3,000.00 | \$3,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| - | Brief description: Used Clothing Line from Schedule A/B: 11 | \$250.00 | \$250.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) |

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| | | | J | | | |
|-----------------------|----------------------------------|--------------------------------|--|-------------------|--------------------------|------------------------------------|
| Fill in thi | s information to identify your | case: | | | | |
| Debtor 1 | Clarene | | Johnson | | | |
| | First Name | Middle Name | Last Name | - | | |
| Debtor 2 | | | | | | |
| (Spouse, if | filing) First Name | Middle Name | Last Name | - | | |
| United S | tates Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case nu (If known) | mber | | | - | | |
| , , | | | | | | Chapte if this is an |
| Offic | ial Form 106D | | | | | Check if this is an amended filing |
| Sche | edule D: Credi | tors Who Ha | ve Claims Secu | red by P | roperty | 12/15 |
| more spa | | | le are filing together, both are and attach it | | | |
| 1. Do | any creditors have claims | secured by your proper | rty? | | | |
| ✓ | No. Check this box and sub | omit this form to the court | with your other schedules. You | have nothing else | to report on this form | n. |
| | Yes. Fill in all of the informat | ion below. | | | | |
| Part 1: | List All Secured Claims | | | | | |
| for | | reditor has a particular claim | red claim, list the creditor separate, list the other creditors in Part 2. A g to the creditor's name. | , | ct the collateral | Column C Unsecured portion If any |

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| Debtor 1 Clarene Johnson First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or Schedule AP Property (Official Form 106A/B) and on Schedule B: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule B: Creditors Who Hold claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims it is. If a claim has both priority and nonpriority amounts, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors have two priority unsecured claims, fill out the Continuation of each type of claim, see the instructions for this form in the instruction booklet.) | | | | | | | | | |
|--|--------------------------------|--|--|---|---|--|----------------------------|----------------------------------|--------------------------------|
| First Name Middle Name Last Name Debtor 2 (Spouse, If filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northem District of Illinois Case number (Irknown) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list thy to have more and show both priority and nonpriority and nonpriority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | HIII I | n this infori | nation to identify your c | ase: | | | | | |
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northem District of Illinois (State) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name for you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Deb | tor 1 | Clarene | | Johnson | | | | |
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| Case number (Itknown) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | (Spo | use, II IIIIng) | First Name | Middle Name | Last Name | | | | |
| Case number (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106B). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Unit | ted States B | ankruptcy Court for the: | Northern | | | | | |
| Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106A/B) on to include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Cas | o numbor | | | (State) | | | | |
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| Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? Ves. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | | | 11 | | | | | |
| other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | 50 | nedu | ile E/F: Cre | editors who | Have Unse | ecured Claims | | | 12/15 |
| Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Form clain the e knov | n 106Å/B) a ns that are entries in t vn). | and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At | cutory Contracts and Une reditors Who Hold Claims tach the Continuation Pag | xpired Leases (Official Secured by Property. | Form 106G). Do not include a If more space is needed, copy | ny creditor the Part yo | s with partia ou need, fill i | ally secured it out, number |
| Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | 1. | Do any cr | editors have priority un | secured claims against ye | ou? | | | | |
| 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total Priority Nonpriority | | No. 0 | Go to Part 2. | | | | | | |
| listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total Priority Nonpriority | | Yes. | | | | | | | |
| | 2. | listed, ider As much a Continuati | ntify what type of claim it as possible, list the claims on Page of Part 1. If mor | is. If a claim has both priority in alphabetical order accord e than one creditor holds a p | y and nonpriority amour ling to the creditor's nan particular claim, list the o | its, list that claim here and show ne. If you have more than two pri ther creditors in Part 3. | both priority | and nonprio | rity amounts. |
| | | | | | | | Total claim | Priority amount | Nonpriority amount |

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **V** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** ARMOR SYSTEMS CO 4.1 \$88.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3/2013 1700 KIEFER DR STE 1 Number Street As of the date you file, the claim is: Check all that apply. Contingent ZION Illinois 60099 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only $\overline{\mathbf{v}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes I C SYSTEM INC 4.2 \$478.00 Last 4 digits of account number 9001 Nonpriority Creditor's Name When was the debt incurred? 3/2015 PO BOX 64378 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL 55164 Minnesota Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only $\overline{}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? \checkmark ORIGINAL CREDITOR: ATT U-**✓** No Other. Specify VERSE Yes MIDWST RCVRY \$748.00 Last 4 digits of account number 4363 Nonpriority Creditor's Name When was the debt incurred? 12/2017 2747 W CLAY STREET SUITE A Street As of the date you file, the claim is: Check all that apply. Contingent SAINT CHARLES 63301 Missouri Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? ✓ ORIGINAL CREDITOR: 12 THE No Other. Specify **CASH STORE** Yes

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 Debtor 1 First Name
 Glarene
 Johnson
 Case number (if known)

 Last Name
 Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | Page | |
|--------|---|---|-------------|
| | After listing any entries on this page, number them beginning with | th 4.5, followed by 4.6, and so forth. | Total claim |
| 4.4 | MIDWST RCVRY Nonpriority Creditor's Name 2747 W CLAY STREET SUITE A Number Street | Last 4 digits of account number 8388 When was the debt incurred? 12/2017 As of the date you file, the claim is: Check all that apply. | \$690.00 |
| | SAINT CHARLES Missouri 63301 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection; Collecting for ORIGINAL CREDITOR: 12 E Other. Specify PAYDAY LOAN | |
| 4.5 | ONEMAIN Nonpriority Creditor's Name PO BOX 1010 Number Street EVANSVILLE Indiana 47706 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Hen was the debt incurred? 4/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 024 InstallmentLoan | \$2,303.00 |
| 4.6 | SWISS COLONY Nonpriority Creditor's Name P.O. Box 800849 Number Street Dallas Texas 75380 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 9136 When was the debt incurred? 11/2011 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard | \$194.00 |

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 WORLD FINANCE CORPORAT \$360.00 Last 4 digits of account number 6101 Nonpriority Creditor's Name 6224 HEARNE When was the debt incurred? 7/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent **SHREVEPORT** Louisiana 71108 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 007 InstallmentLoan Other. Specify ____ Is the claim subject to offset? $\overline{\mathbf{A}}$

✓ No Yes Case 18-13683 Doc 1 Filed 05/10/18 Entered 05/10/18 12:01:16 Desc Main Document Page 27 of 64

Debtor 1 Clarene Johnson Case number (if known)
First Name Middle Name Last Name

| 1 11 01 140 | mo made rano Last rano | | |
|--------------------------|---|-------|-------------------------------|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for s | tatistical reporting purposes |
| | | | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | Total claims |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$4,861.00 |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$4,861.00 |

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| Debtor 1 | Clarene | | Johnson | |
|---------------------|---------------------------|-------------|------------------------------|--|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | 20 | oumont rage | 20 01 0 1 |
|------------------------|----------------------------|---|------------------------------|---|
| Fill in this info | rmation to identify your o | ase: | | |
| Debtor 1 | Clarene | | Johnson | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | |
| Coop number | | | (State) | |
| Case number (If known) | - | | | |
| Official | Form 106H | | | Check if this is an amended filing |
| Schedul | e H: Your Co | lebtors | | 12/15 |
| , | | ou are filing a joint case, do | not list either spouse as a | a codebtor.) |
| Idaho, Lo | uisiana, Nevada, New Me | lived in a community proxico, Puerto Rico, Texas, W | | (Community property states and territories include Arizona, California, 1.) |
| | Go to line 3. | | | |
| ☐ Yes | • • | er spouse, or legal equiva | lient live with you at the t | ime? |
| ✓ | No | | | |
| | Yes. In which communi | y state or territory did you | ı live? | Fill in the name and current address of that person. |
| | Name of your spouse, | ormer spouse, or legal equ | ivalent | |
| | Number Street | | | |
| | City | State | Zip Co | de |
| 3. In Colum | n 1, list all of your code | otors. Do not include you | r spouse as a codebtor i | if your spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G to fill out Column 2.

Column 1: Your codebtor

Check all schedules that apply:

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| | | | | | 9 | | |
|---|--|---|--------------------------|---------------|-------------|--------------|--|
| Fill in this i | nformation to identify | your case: | | | | | |
| Debtor 1 | Clarene | | Johnso | on | | | |
| | First Name | Middle Name | Last N | ame | | Che | ck if this is: |
| Debtor 2 | ng) First Name | A d'alaita A la cons | 1 1 N 1 | | | | An amended filing |
| (Spouse, II IIII | 19) First Name | Middle Name | Last N | ame | | | • |
| the: | es Bankruptcy Court for | Northern | _ District of Illi (S | nois tate) | | | A supplement showing post-petition chapter 13 expenses as of the following date: |
| (If known) | er | | | | | | MM / DD / YYYY |
| Official | Form 106I | | | | | | |
| Schedu | ule I: Your In | come | | | | | 12/15 |
| information spouse. If n number (if I | about your spouse. I | f you are separated and , attach a separate she y question. | d your spous | se is n | ot filing w | ith you, do | r spouse is living with you, include not include information about your onal pages, write your name and case |
| 1. Fill in yo | our employment | | Debtor 1 | | | | Debtor 2 |
| | | Employment status | Emplo | ved | | | Employed |
| _ | ave more than one job, separate page with | | | nploye | d | | Not Employed |
| information about additional employers. | | Occupation | | 1 7 - | | | |
| | part time, seasonal, or bloyed work. | Employer's name | | | | | |
| | tion may include student emaker, if it applies. | Employer's address | Number Str | eet | | | Number Street |
| | | How long employed | City | | State | Zip Code | City State Zip Code |
| | | there? | | | | | |
| Part 2: G | ive Details About N | Monthly Income | | | | | |
| spouse unl | ess you are separated. | e more than one employer, | - | | | employers fo | r that person on the lines below. If you need For Debtor 2 or non-filing spouse |
| | | ary, and commissions (befo , calculate what the monthly | | 2. | | \$0.00 | |
| 3. Estima | ate and list monthly ove | rtime pay. | | 3 | | + \$0.00 | |
| 4. Calcu | late gross income. Add l | ne 2 + line 3. | | 4. | | \$0.00 | |

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| Deb | otor 1 <u>Clarene</u> First Name | | Johnson Last Name | | Case numbe | er <i>(if</i> | | |
|-----------------------|---|---|----------------------|------------|----------------------|-----------------------------------|-------|-------------------------|
| | THSTNAME | Widdle Name | Last Name | | known) For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| C | opy line 4 here | | → 4. | | \$0.00 | | | |
| 5. Li | st all payroll deductions: | | | | | | | |
| 5 | a. Tax, Medicare, and Soc | ial Security deductions | 5a | ι. | \$0.00 | | | |
| 5 | b. Mandatory contribution | ns for retirement plans | 5b |). | \$0.00 | | | |
| 5 | c. Voluntary contributions | for retirement plans | 50 |). | \$0.00 | | | |
| 5 | d. Required repayments o | of retirement fund loans | 50 | d. | \$0.00 | | | |
| 5 | e. Insurance | | 5e |). | \$0.00 | | | |
| 5 | f. Domestic support obliga | ations | 5f. | • | \$0.00 | | | |
| 5 | g. Union dues | | 5g | J . | \$0.00 | | | |
| 5 | h. Other deductions. Spec | sify: | _ 5h | 1. + | \$0.00 | | | |
| 6. A 6 +5h. | | . Add lines 5a + 5b + 5c + 5d + 5e +5f | f + 5g 6. | | \$0.00 | | | |
| 7. C a | alculate total monthly tak | e-home pay. Subtract line 6 from line | e 4. | | \$0.00 | | | |
| 8. Li | st all other income regula | arly received: | | | | | | |
| 8 | business, profession, or | | | | | | | |
| | | ch property and business showing nd necessary business expenses, and | | | | | | |
| | the total monthly net inco | ome. | 8a | ι. | \$0.00 | | | |
| 8 | b. Interest and dividends | | 8b |). | \$0.00 | | | |
| 8 | dependent regularly red | | | | | | | |
| | divorce settlement, and p | support, child support, maintenance, roperty settlement. | 80 |). | \$0.00 | | | |
| 8 | d. Unemployment comper | nsation | 80 | d. | \$0.00 | | | |
| 8 | e. Social Security | | 8e |). | \$1,360.00 | | | |
| 8 | Include cash assistance at cash assistance that you r | stance that you regularly receive nd the value (if known) of any non- receive, such as food stamps (benefits Jutrition Assistance Program) or ns Income | s 8f. | <u>.</u> | \$15.0 <u>0</u> | | | |
| 8 | g. Pension or retirement i | income | 89 | J. | \$0.00 | | | |
| 8 | h. Other monthly income. | Specify: | 8h | 1. + | \$0.00 + | | | |
| 9. A | dd all other income Add lir | nes 8a + 8b + 8c + 8d + 8e + 8f +8g + | + 8h. 9. | | \$1,375.00 | |] | |
| | Calculate monthly income. and the entries in line 10 for l | . Add line 7 + line 9. Debtor 1 and Debtor 2 or non-filing sp | 10 pouse |). | \$1,375.00 | - | _ = | \$1,375.00 |
| Ir fr | nclude contributions from ar riends or relatives. | ntributions to the expenses that your unmarried partner, members of your already included in lines 2-10 or amou | household, | your c | ependents, your room | , | | |
| | specify: | , | | | , ,, , ,, , | | 11. + | \$0.00 |
| _ | | | | | | | | |
| | | t column of line 10 to the amount in Immary of Schedules and Statistical Su | | | | | 12. | \$1,375.00 |
| | | | | | | | | Combined monthly income |
| 13. [| Do you expect an increase | or decrease within the year after y | you file this | form? | • | | | |
| | ₹ | | | | | | | - |
| L | Yes. Explain: | | | | | | | |

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| | | Doo | cument Page 32 of 6 | 4 | | |
|---------------------------------|--|--|--|-------------------------------------|--------------------------|--------------|
| Fill in this infor | mation to identify your | case: | | | | |
| Debtor 1 | Clarene | | Johnson | | | |
| | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filing | | |
| United States B | Sankruptcy Court for the | e: Northern | District of Illinois (State) | A supplement sho expenses as of the | | |
| Case number | | | (Otato) | MM / DD / YYYY | | |
| | | | | MIMI / DD / TTTT | | |
| Official | <u>Form 106J</u> | | | | | |
| Schedul | e J: Your Ex | penses | | | | 12/15 |
| information. If (if known). Ans | | d, attach another sheet to th | are filing together, both are equalisis form. On the top of any addition | | - | number |
| 1. Is this a joi | nt case? | | | | | |
| ✓ No. Go | to line 2 | | | | | |
| Yes. Do | oes Debtor 2 live in a | separate household? | | | | |
| _ г | No | | | | | |
| | Yes. Debtor 2 must | file Official Forms 106J-2, Exp | penses for Separate Household of Deb | otor 2. | | |
| 2. Do you have | e dependents? | No | | | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depend with you? | dent live |
| | enses include f people other | No | | | | |
| than | people since | Yes | | | | |
| yourself and dependents | a your | | | | | |
| Part 2: Estir | mate Your Ongoinເ | g Monthly Expenses | | | | |
| | of a date after the bar | | s you are using this form as a supp upplemental Schedule J, check th | | | |
| | | -cash government assistand it on Schedule I: Your Incom | | | Yo | our expenses |
| | or home ownership or the ground or lot. 4. | expenses for your residence. | Include first mortgage payments and | I | 4. | \$352.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real es | state taxes | | | | 4a | \$0.00 |

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Clarene
 Johnson
 Case number (if known)

 Last Name
 Last Name

| I list Name ivilidie vanie Last Name | | |
|---|------------|------------------|
| | | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$200.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$65.00 |
| 6d. Other. Specify: | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 7. | \$450.00 |
| 8. Childcare and children's education costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | 9. | \$50.00 |
| 10. Personal care products and services | 10. | \$50.00 |
| 11. Medical and dental expenses | 11. | \$50.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | 12. | \$150.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a | \$0.00 |
| 15b. Health insurance | 15b | \$0.00 |
| 15c. Vehicle insurance | 15c | \$0.00 |
| 15d. Other insurance. Specify: | 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| Specify: | 16 | \$0.00 |
| 17. Installment or lease payments: | 10 | |
| 17a. Car payments for Vehicle 1 | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | 17b | \$0.00 |
| 17c. Other. Specify: | 17c | \$0.00 |
| 17d. Other. Specify: | 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19.Other payments you make to support others who do not live with you. | | |
| Specify: | 19. | \$0.00 |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property | 200 | 00.00 |
| 20b. Real estate taxes. | 20a 20b | \$0.00 \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20b 20c | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | 20d | \$0.00 |
| 20e. Homeowner's association or condominium dues | | |
| 255. Tellist in a decorption of solidon milding date | 20e | \$0.00 |

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| Debtor 1 Clare | ne | | Johnson | Case number (if known) | | |
|----------------|------------------------|----------------------------|--|------------------------|-----|------------|
| First N | lame | Middle Name | Last Name | | | |
| 21.Other. Spe | cify: | | | | 21 | \$0.00 |
| | | | | | | |
| | your monthly expen | ses. | | | | \$1,367.00 |
| | es 4 through 21. | | | | | \$0.00 |
| | ` . | , · · · · · | from Official Form 106J-2 | | | \$1,367.00 |
| 22c. Add lin | e 22a and 22b. The r | result is your monthly exp | enses. | | 22. | |
| 23. Calculate | our monthly net inc | ome. | | | | |
| 23a. Copy I | ine 12 (your combine | d monthly income) from S | Schedule I. | | 23a | \$1,375.00 |
| 23b. Copy | your monthly expense | es from line 22 above. | | | 23b | \$1,367.00 |
| | | nses from your monthly in | ncome. | | | \$8.00 |
| The re | sult is your monthly r | net income. | | | 23c | |
| | | | oan within the year or do yo nodification to the terms of y | | | |
| | | | | | | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|--|
| Debtor 1 | Clarene | | Johnson | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | | | | | |
| Case number (If known) | | | (Glate) | | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Pai | t 1: Sign Below | | | | | | | | |
|-----|---|--|--|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | | |
| | No | | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Haday nanality of navirus, I dealers that I have used the common of | and askedules filed with this declaration and | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules lifed with this declaration and | | | | | | | |
| × | /s/ Clarene Johnson | × | | | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | | |
| | Date 5/10/2018 | Date | | | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | | | |

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| Fill i | n this inf | formation to identify y | our case: | | | | | |
|---------|--------------------------|---------------------------|------------------------|--|-----------------------|----------------|--------------------|--------------------------------------|
| Deb | tor 1 | Clarene | | John | son | | | |
| | | First Name | Middle | Name Last | Name | | | |
| | itor 2 use, if filing | First Name | Middle | e Name Last | Name | | | |
| Unit | ted States | s Bankruptcy Court for | the: Northern | District of | Illinois | | | |
| Casi | e numbe | ar | | | (State) | | | |
| (If kno | | | | | | | | _ |
| Of | ficia | l Form 107 | | | | | | Check if this is a amended filing |
| | | | = | for Individual | la Filina far | Donley | n lav | |
| _ | | | | for Individua | | | | 04/1 |
| | | | | married people are fili parate sheet to this fo | | | | |
| num | ber (if l | known). Answer eve | ery question. | | | | | |
| Par | t 1: Gi | ive Details About Y | our Marital Statu | s and Where You Liv | ved Before | | | |
| 1. | What | is your current marit | al status? | | | | | |
| | | Married | | | | | | |
| | ш | Narried Not married | | | | | | |
| | | | | | | | | |
| 2. | Durin | g the last 3 years, ha | ve you lived anywhe | re other than where yo | ou live now? | | | |
| | <u> </u> | lo | | | | | | |
| | ☐ Y | es. List all of the plac | es you lived in the la | st 3 years. Do not inclu | de where you live r | IOW. | | |
| | | | | | | | | |
| | C | Debtor 1: | | Dates Debtor 1 live there | ed Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | Samo as | Debtor 1 | | Same as Debtor 1 |
| | | | | | Same as | Debtor i | | Same as Deptor 1 |
| | N | Number Street | | From | Number Stre | et | | From |
| | _ | | | То | | | | То |
| | _ | | | | | | | |
| | | City State | Zip Code | | City | State | Zip Code | Como a sa Dabtan 1 |
| | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | <u> </u> | Number Street | | From | Number Stre | et | | From |
| | _ | | | То | | | | То |
| | | | | | | | | |
| | C | City State | Zip Code | | City | State | Zip Code | |
| 3. | | | | spouse or legal equival | | | | mmunity property states |
| | and terr | ritories include Arizona, | California, Idaho, Lou | ıisiana, Nevada, New Me | xico, Puerto Rico, Te | xas, Washingto | n, and Wisconsin.) | |
| | ✓ No | | | | 4001 0 | | | |
| | ☐ Ye | s. Make sure you fill o | out Schedule H: You | r Codebtors (Official Fo | orm 106H). | | | |

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, Wages, From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages. Wages. For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions exclusions) and exclusions) Social Security \$6,800.00 From January 1 of current year until the date you filed for bankruptcy: Social Security \$15,996.00 For last calendar year: (January 1 to December 31, 2017 \$15,676.00 Social Security For the calendar year before that: (January 1 to December 31, 2016

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City Suppliers or State Zip Code vendors

Other

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| Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? nsiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are an efficer, director, person in control, or owner of 20% or more of their voting securities; and any managing gent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Dates of payment D | or 1 | Clarene | | | hnson | Case number | (if known) |
|--|-------------------------|--|---|---|---|--|--|
| insider include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; opporations of which you are a general partner; owner of 20% or more of 10% owner of 20% or more of 10% owners of 20% or more of 10% or more of | | First Name | Middle Name | Las | st Name | | |
| Total amount pour paid Still owe Reason for this payment Dates of payment Dates of payment Dates of payment Dates of payment Dates of payment Dates of payment Dates of payment Dates of payment Dates of payments or transfer any property on account of a debt that benefited an insider. No Yes. List all payments that benefited an insider. | nsio orp ger | ders include your relative orations of which you nt, including one for a | ves; any general partners are an officer, director, business you operate as | s; relatives of any person in control, | general partners; par or owner of 20% or | tnerships of which y more of their voting | you are a general partner; g securities; and any managing |
| Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Vithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Total amount Amount you still owe Reason for this payment Include creditor's name Number Street City State Zip Code | ~ | | te to an incider | | | | |
| Number Street City State Zip Code | | res. List all payment | s to an insider. | | | | Reason for this payment |
| City State Zip Code Insider's Name Number Street | | Insider's Name | | | <u> </u> | | |
| Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an nisider? notice payments on debts guaranteed or cosigned by an insider. ✓ No Yes. List all payments that benefited an insider. Dates of payment paid Insider's Name Number Street City State Zip Code Insider's Name Number Street Number Street | | Number Street | | | | | |
| Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? nclude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Total amount paid Amount you still owe Insider's Name Number Street City State Zip Code Insider's Name Number Street | | City State | e Zip Code | | | | |
| City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an nisider. No Yes. List all payments that benefited an insider. Dates of payment paid Amount you still owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street | | Insider's Name | | | | | |
| Mithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? No Yes. List all payments that benefited an insider. Dates of payment paid Dates of payment Dates of payment Dates of payment Dates of payment paid Dates of payment Dates of payment paid Dates of payment payment paid Dates of payment payment payment paid Dates of payment payme | | Number Street | | | | | |
| Yes. List all payments that benefited an insider. Dates of payment Total amount you still owe Reason for this payment | | City State | e Zip Code | | | | |
| Insider's Name Number Street City State Zip Code Insider's Name Number Street | i nsi d Inclu | der? ude payments on debts No | s guaranteed or cosigne | ed by an insider. | | | |
| Number Street City State Zip Code Insider's Name Number Street | | | | payment | paid | still owe | Include creditor's name |
| City State Zip Code Insider's Name Number Street | | Insider's Name | | | | | |
| Insider's Name Number Street | | Number Street | | | | | |
| Number Street | | City State | e Zip Code | | | | |
| | | Insider's Name | | | | | |
| City State 7in Code | | Number Street | | | | | |
| | | City Ct-t- | 7in Cod- | | | | |

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished.

City

State

Zip Code

Property was attached, seized, or levied.

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| Debt | or 1 | Clarene First Name | Middle Name | Johnson Last Name | Case number (if known) | | |
|------|----------|---|-----------------------|-----------------------------|-------------------------------|--------------------------------|--------------------|
| 11. | | thin 90 days before you filed fo counts or refuse to make a pa | | | ank or financial institution, | set off any amour | nts from your |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | | | | Describe the action the | creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | Last 4 digits of account n | umher: XXXX- | | |
| | | | | Last Faight of association | umba. 70000 | | |
| 12 | Wit | City State hin 1 year before you filed for | Zip Code | v of your property in the p | ossassion of an assignae fo | r the benefit of c | reditore a court- |
| 12. | | pointed receiver, a custodian, | | y or your property in the p | ossession of all assignee to | Title beliefft of c | reditors, a court- |
| | | No Yes | | | | | |
| Part | 5: | List Certain Gifts and Con | tributions | | | | |
| 13. | Wi | thin 2 years before you filed fo | or bankruptcy, did yo | ou give any gifts with a to | tal value of more than \$600 | per person? | |
| | ✓ | No Yes. Fill in the details for eac | ch gift. | | | | |
| | | Gifts with a total value of mo | ore than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | Person to Whom You Gave the | - Gift | | | | |
| | | - I elson to whom You dave the | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to you | | | | | |
| | | Person to Whom You Gave the | e Gift | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to you | | | | | |

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| btor 1 | Clarene | | Johnson Cas | se number (if known) | | |
|----------|--|---|---|----------------------|---|----------------------------|
| | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| . Wit | thin 2 years before you filed fo | r bankruptcy, did y | you give any gifts or contributions wit | h a total value of | more than \$600 | to any charity? |
| ✓ | No | | | | | |
| È | ı Yes. Fill in the details for each | h aift or contributio | n | | | |
| | | _ | 11. | | | |
| | Gifts or contributions to cha | rities | Describe what you contributed | | Date you | Value |
| | that total more than \$600 | | | | contributed | |
| | | | | | | |
| | Charity's Name | | | | | |
| | | | | | | |
| | | | | | | |
| | Number Street | | | | | |
| | | | | | | |
| | City State | Zip Code | | | | |
| | | | | | | |
| t 6: | List Certain Losses | | | | | |
| | | | | | | |
| | | bankruptcy or since | ce you filed for bankruptcy, did you lo | se anything becau | use of theft, fire, | other disaster, or |
| gar | nbling? | | | | | |
| ✓ | No | | | | | |
| П | Yes. Fill in the details. | | | | | |
| _ | Describe the property you lo | et and | Describe any insurance coverage | for the loss | Date of your | Value of property |
| | how the loss occurred | st allu | Include the amount that insurance h | | loss | lost |
| | | | pending insurance claims on line 33 | | | |
| | | | A/B: Property. | | | |
| | | | | | | |
| | | | | | | |
| Wit | out seeking bankruptcy or pre | bankruptcy, did yo paring a bankruptc | ou or anyone else acting on your beha cy petition? credit counseling agencies for services re | | | anyone you consult |
| Wit | hin 1 year before you filed for out seeking bankruptcy or pre lude any attorneys, bankruptcy p No | bankruptcy, did yo paring a bankruptc | cy petition? | | | anyone you consult |
| Wit | hin 1 year before you filed for out seeking bankruptcy or prej ude any attorneys, bankruptcy p | bankruptcy, did yo paring a bankruptc | cy petition? | | | anyone you consult |
| Wit | hin 1 year before you filed for out seeking bankruptcy or pre lude any attorneys, bankruptcy p No | bankruptcy, did yo paring a bankruptc | cy petition? credit counseling agencies for services re Description and value of any proper | equired in your ban | kruptcy. Date payment | Amount of |
| Wit | hin 1 year before you filed for out seeking bankruptcy or pre lude any attorneys, bankruptcy p No | bankruptcy, did yo paring a bankruptc | cy petition? credit counseling agencies for services re | equired in your ban | kruptcy. Date payment or transfer | |
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| Wit | hin 1 year before you filed for but seeking bankruptcy or preplace any attorneys, bankruptcy pounde any attorneys, bankruptcy pounded and any attorneys, bankruptcy pounded and any attorneys, bankruptcy pounded any | bankruptcy, did yo paring a bankruptcy betition preparers, or settition preparers, or 60031 Zip Code | cy petition? credit counseling agencies for services re Description and value of any propertransferred | equired in your ban | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for but seeking bankruptcy or preplace any attorneys, bankruptcy pounde any attorneys, bankruptcy pounded and any attorneys, bankruptcy pounded and any attorneys, bankruptcy pounded and any attorneys, bankruptcy pounded | bankruptcy, did yo paring a bankruptcy betition preparers, or settition preparers, or 60031 Zip Code | credit counseling agencies for services recordit counseling agencies for services recordit counseling agencies for services recording to the counseling agencies for services agency agency agency agencies for services agency | equired in your ban | Date payment or transfer was made 5/10/2018 | Amount of payment \$353.00 |
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| Wit | hin 1 year before you filed for but seeking bankruptcy or preplude any attorneys, bankruptcy produce any attorneys, bankruptcy produce any attorneys, bankruptcy produce any attorneys, bankruptcy produced any attorneys, bankruptcy produced any attorneys, bankruptcy produced any attorneys, bankruptcy produced and seeking produced and seeking bankruptcy produced and seeking bankruptcy produced any attorneys produced and seeking bankruptcy produced any attorneys produced any attorneys, bankruptcy produced any attorneys produce | bankruptcy, did yo paring a bankruptcy betition preparers, or 60031 Zip Code nt, if Not You 30346 | credit counseling agencies for services recordit counseling agencies for services recordit counseling agencies for services recording to the counseling agencies for services agency agency agency agencies for services agency | equired in your ban | Date payment or transfer was made 5/10/2018 | Amount of payment \$353.00 |
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| First Name | | | e number <i>(if known)</i> | | |
|---|---|--|--|---|---|
| | Middle Name | Last Name | | | |
| thin 1 year before you filed for the second to the second | ors or to make payn | | f pay or transfer a | any property to any | one who promised |
| No | | | | | |
| Yes. Fill in the details. | | | | | |
| | | Description and value of any prope transferred | rty | Date A payment or transfer was made | Amount of payment |
| Person Who Was Paid | | - | | | |
| Number Street | | - | | | |
| | | - | | | |
| City State | Zip Code | | | | |
| No Yes. Fill in the details. | | Description and value of property transferred | payments rec | | Date transfer was |
| Devoca Who Descived Trans | for | - | iii excilarige | | |
| Person who Received Trans | iler | _ | | | |
| Number Street | | _ | | | |
| City State Person's relationship to you | Zip Code | - | | | |
| Person Who Pessived Trans | for | - | | | |
| | ilei | - | | | |
| Number Street | | - | | | |
| City State Person's relationship to you | Zip Code | - | | | |
| | d for bankruptcy, di | d you transfer any property to a self-set | tled trust or simil | lar device of which | you are a |
| thin 10 years before you filed neficiary? nese are often called asset-proto | ection devices.) | | | | |
| neficiary? nese are often called asset-prote | ection devices.) | | | | |
| neficiary? nese are often called asset-prote | ection devices.) | | | | |
| neficiary? nese are often called asset-prote | ection devices.) | Description and value of the prop | erty transferred | | Date transfer was made |
| | Person Who Was Paid Number Street City State thin 2 years before you filed to ordinary course of your buselude both outright transfers and transfers that you have alread I No Yes. Fill in the details. Person Who Received Trans Number Street City State Person's relationship to you Person Who Received Trans Number Street | Person Who Was Paid Number Street City State Zip Code thin 2 years before you filed for bankruptcy, did be ordinary course of your business or financial a stude both outright transfers and transfers made as did transfers that you have already listed on this state. No Yes. Fill in the details. Person Who Received Transfer Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street | Person Who Was Paid Number Street City State Zip Code thin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer are ordinary course of your business or financial affairs? Slude both outright transfers and transfers made as security (such as the granting of a security id transfers that you have already listed on this statement. No Yes. Fill in the details. Description and value of property transferred City State Zip Code Person Who Received Transfer Number Street Person Who Received Transfer Number Street Person Who Received Transfer Number Street | Person Who Was Paid Number Street City State Zip Code thin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to any e ordinary course of your business or financial affairs? clude both outright transfers and transfers made as security (such as the granting of a security interest or mortgage d transfers that you have already listed on this statement. No Yes. Fill in the details. Description and value of property transferred Description and value of property transferred City State Zip Code Person Who Received Transfer Number Street Number Street Number Street | Person Who Was Paid Number Street Date payment or transfer was made |

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Debtor 1 Clarene Johnson Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street

City

State

State

7in Code

Citv

Zip Code

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Debtor 1 Clarene Johnson Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code

City

State

Zip Code

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| Deb | tor 1 | Clarene | | | | hnson | Cas | se number (i | f known) | |
|------|----------|----------------------------|-----------------|-------------------|---------------|----------------|--------------------|----------------|---|--------------------|
| | | First Name | | Middle Name | Las | t Name | | | | |
| 26. | Hav | e you been a party | / in any judici | al or administi | ative procee | eding under | any environme | ntal law? In | nclude settlements and o | rders. |
| | | No Yes. Fill in the det | ails. | | | | | | | |
| | | | | | Court or age | ency | | Nature | of the case | Status of the case |
| | | Case title | | | Court Name | | | | | Pending |
| | | Case number | | | NumberStree | et . | | | | On appeal |
| | | | | | City | State | Zip Code | | | Concluded |
| Pari | i 11: | Give Details Ab | out Your B | usiness or Co | onnections | to Any Bu | siness | | | |
| 27. | Witl | nin 4 years before | you filed for b | ankruptcy, dic | l you own a l | business or | have any of the | following o | connections to any busing | ess? |
| | | A sole propri | etor or self-en | nployed in a tra | ade, profess | ion, or other | activity, either t | full-time or p | part-time | |
| | | _ | | lity company (l | LC) or limite | d liability pa | rtnership (LLP) | | | |
| | | A partner in a | - | aging executiv | e of a corpo | oration | | | | |
| | | | | the voting or e | | | ooration | | | |
| | ✓ | No. None of the a | | | | | | | | |
| | | Yes. Check all that | at apply abov | e and fill in the | | | | | | |
| | | | | | Descri | be the natu | ire of the busine | ess | Employer Identificatio include Social Securit | |
| | | Business Name | | | _ | | | | EIN: | |
| | | Number Street | | | — Name | of account | ant or bookkeep | per | Dates business existed | d |
| | | City | State | Zip Code | | | | | From To | |
| | | | | | | | | | | |
| | | | | | Descr | ibe the natu | ire of the busine | ess | Employer Identificatio include Social Securit | |
| | | Business Name | | | _ | | | | EIN: | |
| | | Number Street | | | _ | | | | Dates business existed | i |
| | | City | State | Zip Code | Name | of accounta | ant or bookkeep | oer | From To | |
| | | • | | , | | | | | 1010 | |
| | | | | | | | | | | |
| | | | | | Descr | ibe the natu | ire of the busine | ess | Employer Identificatio include Social Securit | |
| | | Business Name | | | _ | | | | EIN: | |
| | | Number Street | | | — Name | of account: | ant or bookkee; | per | Dates business existed | i |
| | | City | State | Zip Code | _ | | 2.2.3 | | From To | |
| | | | | | | | | | | |

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| Deb | tor 1 | Clarene | | Johnson | Case number (if known) |
|-----|------------|--|---------------------------|--------------------------------------|---|
| | | First Name | Middle Name | Last Name | |
| 28. | | hin 2 years before yo ditors, or other parti No Yes. Fill in the detail | es. | d you give a financial statement t | o anyone about your business? Include all financial institutions, |
| | | | | Date issued | |
| | | | | | |
| | | Name | | MM/DD/YYYY | |
| | | Number Street | | <u>—</u> | |
| | | Hambor Guode | | | |
| | | City | State Zip Code | | |
| Dov | t 12: | Sign Below | | | |
| | true a | and correct. I unders | stand that making a false | statement, concealing property, | s, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /\$/ Cla | arene Johnson | | · |
| | | Signature | e of Debtor 1 | | Signature of Debtor 2 |
| | | Date 5/1 | 0/2018 | | Date |
| | ✓ N Did y | ou attach additional lo 'es | pages to Your Statement | t of Financial Affairs for Individua | s Filing for Bankruptcy (Official Form 107)? kruptcy forms? |
| | □ , | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|----------------------|--|--|
| Debtor 1 | Clarene | Johnson | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | | |
| | | | (State) | | |
| Case number (If known) | | | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors Winformation below. | Vho Have Claims Secured by Property (Official Form | n 106D), fill in the |
|----|--|--|---|
| | Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and | No. Yes. |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and | No. Yes. |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and | No. Yes. |

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| | Clarene First Name | Middle Nesse | Johnson Leet Name | Case number (if |
|-----|------------------------------|--|--------------------------|---|
| | First Name | Middle Name | Last Name | known) |
| | | ed Personal Property Leas | | |
| at | ion below. Do not lis | | d leases are leases that | Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). |
| 986 | cribe your unexpired | personal property leases | | Will the lease be assumed? |
| ess | sor's name: | | | □ No □ Yes |
| | cription of leased perty: | | | _ |
| ess | sor's name: | | | □ No □ Yes |
| | cription of leased perty: | | | |
| ess | sor's name: | | | □ No □ Yes |
| | cription of leased perty: | | | - |
| ess | sor's name: | | | □ No □ Yes |
| | cription of leased perty: | | | - |
| ess | sor's name: | | | □ No □ Yes |
| | cription of leased perty: | | | |
| ess | sor's name: | | | □ No □ Yes |
| | cription of leased perty: | | | |
| 988 | sor's name: | | | □ No □ Yes |
| | cription of leased perty: | | | _ |
| | Sign Below | I de alore that I have the training | | |
| | | I declare that I have indicated o an unexpired lease. | my intention about any | property of my estate that secures a debt and any personal |
| | s/ Clarene Johnson | | <u> </u> | |
| Siç | gnature of Debtor 1 | | Sig | nature of Debtor 2 |
| Da | ate 5/10/2018 | | Dat | e |
| | MM/DD/YYYY | | Bat | MM/DD/YYYY |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Distric | ct or illinois | | | | | |
|------|---|---------------------------------|--|--------------------------------|--|--|--|--|
| n re | Clarene Johnson | | Case No. | | | | | |
| | Debtor | | | (If known) | | | | |
| | | | Chapter | Chapter 7 | | | | |
| | DISCLOSURE OF | COMPENSATIO | N OF ATTORNEY F | FOR DEBTOR | | | | |
| 1 | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of the p | petition in bankruptcy, or agreed t | to be paid to me, for services | | | | |
| | For legal services, I have agreed to ac | cept | | \$518.00 | | | | |
| | Prior to the filing of this statement I h | nave received | | \$353.00 | | | | |
| | Balance Due | | | \$165.00 | | | | |
| 2 | . The source of the compensation paid | I to me was: | | | | | | |
| | ✓ Debtor | Other (specify) | | | | | | |
| 3 | . The source of the compensation paid | I to me is: | | | | | | |
| | Debtor | Other (specify) | | | | | | |
| 4 | I have not agreed to share the abomembers and associates of my la | | n with any other person unless th | ey are | | | | |
| | I have agreed to share the above- members or associates of my law the people sharing in the comper | r firm. A copy of the agreeme | th a other person or persons who ent, together with a list of the nam | | | | | |
| 5 | . In return for the above-disclosed fee, | I have agreed to render legal | I service for all aspects of the ban | kruptcy case, including: | | | | |
| | Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; | | | | | | | |
| | b. Preparation and filing of any p | oetition, schedules, statemer | nts of affairs and plan which may | be required; | | | | |
| | c. Representation of the debtor | at the meeting of creditors a | nd confirmation hearing, and any | adjourned hearings thereof; | | | | |
| 6 | . By agreement with the debtor(s), the | above-disclosed fee does no | ot include the following services: | | | | | |
| | | | | | | | | |
| | | CERTIFICA | ATION | | | | | |
| | I certify that the foregoing is a complet tor(s) in this bankruptcy proceedings. | e statement of any agreemer | nt or arrangement for payment to | me for representation of the | | | | |
| | 5/10/2018 | | /s/ Nathan Delman | | | | | |
| | Date | | Signature of Attorney | | | | | |
| | | | Semrad Law Firm | | | | | |
| | | | Name of law firm | | | | | |

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CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC \$518.00 in attorney fees plus costs in the amount of \$382.00 to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding.

Adding additional bills

Motion to Reopen and Avoid Lien

Motion to Reopen

\$350.00/hr. \$31.00

\$1000.00

\$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC . Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Date: 5/10/2018

*DISCLAIMER

Clarene Johnson

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1.717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| Johnson, Clarene | Case No. | |
|---|---|--|
| Debtor(s) | Case No. | |
| | Chapter. | Chapter7 |
| VERIFICAT | TION OF CREDITOR MAT | RIX |
| e above named Debtors hereby verify tha | t the attached list of creditors is tr | ue and correct to the best of their |
| 5/10/2018 | /s/ Johnson, Clar Johnson, Claren | e |
| | VERIFICAT e above named Debtors hereby verify tha | VERIFICATION OF CREDITOR MAT e above named Debtors hereby verify that the attached list of creditors is tr |

ONEMAIN PO BOX 1010 EVANSVILLE, IN, 47706

MIDWST RCVRY 2747 W CLAY STREET SUITE A SAINT CHARLES, MO, 63301

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

WORLD FINANCE CORPORAT 6224 HEARNE SHREVEPORT, LA, 71108

SWISS COLONY P.O. Box 800849 Dallas, TX, 75380

ARMOR SYSTEMS CO 1700 KIEFER DR STE 1 ZION, IL, 60099

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| Debtor 1 Clarene | | Johnson | Case number (if known) | | |
|---|--|--|---|--|--|
| First Name | Middle Name | Last Name | | | |
| Part 6: Answer These Qu | estions for Reporting F | The second secon | e - control - but to be a superior and a superior | | |
| 16. What kind of debts do you have? | "incurred by an in No. Go to lin Yes. Go to lin 16b. Are your debts pronney for a busi No. Go to lin Yes. Go to lin | ndividual primarily for a pe e 16b. ne 17. primarily business debts? ness or investment or thro e 16c. ne 17. | ? Consumer debts are defining rsonal, family, or household Business debts are debts though the operation of the bust to consumer debts or business. | purpose." at you incurred to obtain siness or investment. | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing unde expenses are p | nder Chapter 7. Go to line 18 er Chapter 7. Do you estimate paid that funds will be availab | | is excluded and administrative editors? | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5 5,001-1 10,001 | /%: | 25,001-50,000 50,001-100,000 More than 100,000 | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,00 \$500,001-\$1 millio | \$10,000 00 \$50,000 | 0,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | | \$10,000 00 \$50,000 | 001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| Olgii Delow | I have everying this p | stition and I declare under | nonalty of navium that the in | formation and ideal is to a sol | |
| For you | correct. If I have chosen to file to of title 11, United State under Chapter 7. If no attorney represent out this document, I have correct. | under Chapter 7, I am awa es Code. I understand the I ts me and I did not pay or a ave obtained and read the r | re that I may proceed, if eligit relief available under each ch agree to pay someone who is notice required by 11 U.S.C. | | |
| | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, c both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| | /s/ Clarene Johnso Signature of Debtor 1 | blarenejohn | Signature of Debto | r 2 | |
| | Executed on5 | /10/2018 MM / DD / YYYY | Executed on | MM / DD / YYYY | |

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| Debtor 1 | Clarene | | Johnson | |
|---------------------|--------------------------|-------------|----------------------|--|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois | |
| Case number | (*) | | (State) | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | 1: Sign Below | | |
|-----|---|---|--|
| | Did you pay or agree to pay someone who is NOT an attorney | to help you fill out bankruptcy forms? | |
| | ☑ No | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| | | | |
| | | | |
| | Under penalty of perjury, I declare that I have read the summathat they are true and correct. | ary and schedules filed with this declaration and | |
| × | 1s/ Clarene Johnson (Arene Athason | × | |
| | Signature of Debtor 1 | Signature of Debtor 2 | |
| | Date 5/10/2018 | Date | |
| | MM/DD/YYYY | MM/DD/YYYY | |

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| Debtor 1 | | | Johnson | Case number (if known) |
|---------------|---------------|---|--------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. With cree | ditors, or of | before you filed for bankrupto ther parties. the details below. | y, did you give a financial st | atement to anyone about your business? Include all financial institutions, |
| | | | Data tasus d | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | | | | |
| | Number | Street | | |
| | 1 | | | |
| | City | State Zip Co | ode | |
| Part 12: | Sign Beld | ow | | |
| a bai | nkruptcy ca | se can result in fines up to \$2! | 50,000, or imprisonment for | property, or obtaining money or property by fraud in connection with up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | Signature of Debtor 1 | | Signature of Debtor 2 |
| | | 2.7 | | Date |
| | | Date 5/10/2018 | | |
| Did y | ou attach a | dditional pages to Your Stater | ment of Financial Affairs for | Individuals Filing for Bankruptcy (Official Form 107)? |
| | No | 9 | | |
| | Yes | | | |
| Did y | ou pay or a | gree to pay someone who is no | ot an attorney to help you fil | out bankruptcy forms? |
| | No | | | |
| l-mail | Yes. Name of | f person | | Attach the Bankruptcy Petition Preparer's Notice, |

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| Debto | or Clarene | | Johnson | Case number (if | |
|--|--------------------------------|--|----------------------------|--|--|
| 1 | First Name | Middle Name | Last Name | known) | |
| Part 2 | List Your Unexpired | l Personal Property Leas | es | | |
| inforn | nation below. Do not list | | l leases are leases that a | Contracts and Unexpired Leases (Official Form 106G), fill in the tree still in effect; the lease period has not yet ended. You may J.S.C. § 365(p)(2). | |
| Describe your unexpired personal property leases Will the lease be assured | | | | | |
| L | essor's name: | | | □ No □ Yes | |
| | lescription of leased roperty: | | | | |
| L | essor's name: | | | ☐ No ☐ Yes | |
| | escription of leased roperty: | | | _ | |
| L | essor's name: | | | □ No □ Yes | |
| | escription of leased roperty: | | | _ | |
| L | essor's name: | | - 2 | □ No □ Yes | |
| | escription of leased roperty: | | | | |
| L | essor's name: | | | □ No □ Yes | |
| | escription of leased roperty: | | | | |
| L | essor's name: | | | □ No □ Yes | |
| | escription of leased roperty: | | | | |
| Le | essor's name: | | | □ No □ Yes | |
| | escription of leased roperty: | | | _ | |
| Part 3: | Sign Below | | | | |
| Und | | eclare that I have indicated in unexpired lease. | my intention about any p | roperty of my estate that secures a debt and any personal | |
| × | | larene Johns | an x | | |
| ĺ | Signature of Debtor 1 | | Sign | ature of Debtor 2 | |
| | Date 5/10/2018 MM/DD/YYYY | V | Date | MM/DD/YYYY | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Johnson, Clarene | O N |
|-----------------|--|--|
| Debtor(s) | | Case No |
| | | Chapter. Chapter7 |
| | VERIFICATION | ON OF CREDITOR MATRIX |
| TI knowledge | he above named Debtors hereby verify that the above named Debtors hereby verify the above named Debtors hereby verification of the above n | ne attached list of creditors is true and correct to the best of their |
| Date: | 5/10/2018 | Johnson, Clarene Johnson, Clarene Signature of Debtor |

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| Debtor 1 Clarene First Name | Middle Name | Johnson Last Name | Case number | (if known) | |
|--|--|---|--|-------------------------------------|-----------------|
| | , made italie | East Marie | Column A Debtor 1 | Column B Debtor 2 or non-filing spo | II SA |
| 8. Unemployment compensation Do not enter the amount if you under the Social Security Act. In | contend that the amount re- | ceived was a benefit | \$0.00 | | |
| For you | | \$0.00 | | | |
| For your spouse | Danie. | \$0.00 | | | |
| Pension or retirement incom benefit under the Social Securit | y Act. | | \$0.00 | - | = |
| 10.Income from all other source amount. Do not include any be payments received as a victim of international or domestic terrori page and put the total below. | enefits received under the Soc of a war crime, a crime agains | cial Security Act or thumanity, or | | | |
| Other Government Assistance | | | \$15.00 | | |
| Total amounts from separate p | ages, if any. | | +\$0.00 | + | |
| 11. Calculate your total current | t monthly income. Add line | s 2 through 10 for | \$15.00 | + | \$15.00 |
| column. Then add the total for | or Column A to the total for C | Column B. | | | |
| | | | | | Total current |
| Part 2: Determine Whether | the Means Test Applies | s to You | | | monthly income |
| 12. Calculate your current mont | | | No. of the last of | | |
| 12a. Copy your total current me | | me w troop stops. | | Copy line 11 here → | \$15.00 |
| Multiply by 12 (the numb | er of months in a year). | | | | X 12 |
| 12b. The result is your annual i | ncome for this part of the for | m. | | | 12b. \$180.00 |
| | | | | | |
| 13 Calculate the median family | income that applies to you | . Follow these steps: | | | |
| Fill in the state in which you live | | Illinois | | | |
| Fill in the number of people in y | our household. | 1 | | | |
| Fill in the median family income household. | for your state and size of | | | | 13. \$52,410.00 |
| To find a list of applicable media instructions for this form. This I | an income amounts, go onlir ist may also be available at th | ne using the link specified e bankruptcy clerk's offic | I in the separate e. | | |
| 14. How do the lines compare? | | | | | |
| 14a. Line 12b is less than 6 Go to Part 3, | or equal to line 13. On the to | p of page 1, check box 1 | , There is no presumption | n of abuse. | |
| 14b. Line 12b is more than Go to Part 3 and fill o | l line 13. On the top of page ut Form 122A-2. | 1, check box 2, The pres | sumption of abuse is det | ermined by Form 122A-2 | 2. |
| Part 3: Sign Below | | | | | |
| | | | | | |
| By signing here, I declare under | er penalty of perjury that the in | nformation on this staten | nent and in any attachme | ents is true and correct. | |
| ✗ /s/ Clarene Johnson | arenetohns | m x | | | |
| Signature of Debtor 1 | V | | ignature of Debtor 2 | | |
| Date 5/10/2018 MM/DD/YYYY | | D | ate 5/10/2018 MM/DD/YYYY | | |
| If you checked line 14a, do I If you checked line 14b, fill c | NOT fill out or file Form 122A out Form 122A-2 and file it w | -2. ith this form. | | | |